

PERSONALITY (201) FILE REQUEST

TO RI/ANALYSIS SECTION	DATE 28/5/57	ACTION		
FROM RI/AN/EE		X OPEN	AMEND	CLOSE
	ROOM NO.	TELEPHONE 1512A		

INSTRUCTIONS: Form must be typed or printed in block letters.

SECTION I: List 201 number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.

SECTION II: List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.

SECTION III: To be completed in all cases.

SECTION I										
SENSITIVE		NONSENSITIVE		NAME		NAME VARIANT		SOURCE DOCUMENT		
<input checked="" type="checkbox"/>				(Last)	(First)	(Middle)	(Title)	EGLA 23707		
EILITZ		HERBERT		WILHELM		KURT		SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		
TYPE NAME 2.		(Last)		(First)		(Middle)		(Title)		
<p style="text-align: center;">RECORD COPY</p>										
PHOTO	4.	BIRTH DATE	5.	COUNTRY OF BIRTH	6.	CITY OR TOWN OF BIRTH	7.	OTHER IDENTIFICATION		
<input type="checkbox"/> YES	X	<input type="checkbox"/> NO	16 M 08 07	GERM	LEIPZIG			1.	2.	3.
OCCUPATION/POSITION										

SECTION II									
CRYPTONYM					PSEUDONYM				
					DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES/METHODS/EXEMPTION 3B2E NAZI WAR CRIMES DISCLOSURE ACT DATE 2006				

COUNTRY OF RESIDENCE		10. ACTION DESK	11. SECOND COUNTRY INTEREST	12. THIRD COUNTRY INTEREST	12a.
		E/G/U.			

COMMENTS: SUBJECT CLAIMS HE WAS FORCED INTO
GESTAPO AGAINST WILL.
NAME CHECK REQUESTED.

PERMANENT CHARGE		RESTRICTED FILE		SIGNATURE	
<input type="checkbox"/> YES	X	<input type="checkbox"/> NO	<input type="checkbox"/> YES	X	<input type="checkbox"/> NO

BEST AVAILABLE COPY